

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

SUNBEAM PRODUCTS  
INCORPORATED, f/k/a SUNBEAM  
CORPORATION  
c/o Its Registered Agent: CT Corporation  
631 Lakeland East Dr.  
Flowood, MS 39232-8815

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

**X** Agent Addressee

## B. Received by (Printed Name)

Jones

## C. Date of Delivery

11/29

## D. Is delivery address different from item 1?

 Yes

If YES, enter delivery address below:

 No

2:06CV 1034

SAC

## 3. Service Type

Certified Mail  
 Registered  
 Insured Mail

Express Mail  
 Return Receipt for Merchandise  
 C.O.D.

## 4. Restricted Delivery? (Extra Fee)

 Yes2. Article Number  
(Transfer from sen)

7003 3110 0004 0799

111111111111111111

Domestic Return Receipt

PS Form 3811, August 2001